



First report pursuant to State of California Interagency Agreement for the

**California Department of Alcoholic Beverage Control (ABC)**

And

**California State University**

From the

**University of California, San Diego (UCSD)**

**School of Medicine**

**Department of Psychiatry**

In collaboration with the

**Higher Education Center for Alcohol and Other Drug Prevention  
(Center)**

In support of the

**CALIFORNIA ALCOHOL ISSUES PARTNERSHIP  
(CAIP)**

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## Making the Prevention of Alcohol Problems a Priority

The 23-campus CSU system is making great strides in renewing commitments and establishing partnerships to promote safe, healthy, and learning-conducive environments. Already the alcohol policy adopted by the Trustees in 2001 is yielding results in the form of greater campus attention, additional resources from state and Federal governments, and reported progress in reducing alcohol-related problems.

Indeed, to paraphrase CSU chancellor Charles Reed speaking to the U.S. Department of Education's National Meeting on Alcohol, Other Drug, and Violence Prevention in Higher Education, in 2001, the system and its campuses are making alcohol problem prevention *a high priority*.

However, the system is not immune from continuing reminders of the adverse consequences of alcohol's undue influence in higher education settings. Recent headlines in California newspapers chronicle the ongoing challenge:

"Fraternities suspended after deadly brawl," blares one California daily in January 2003, covering an off-campus incident involving CSU and other students. The article implicates alcohol in fraternity life, quoting a fraternity house neighbor, "For a long time, there has been fighting, drinking and partying. It starts on Thursday and continues through the weekend."

"Rowdy frat row needs taming, officials say," reported a Southern California daily the previous month, detailing the long-running tension between Greek houses and neighbors adjacent to another CSU campus. The impetus for the story was the \$100,000 in damages during a final house party thrown by a fraternity chapter facing eviction.

All the news is certainly not bad, e.g.:

"Excessively loud parties can lead to citation, arrest," appeared also in December 2002 in a Southern California newspaper. The story tells of positive developments in another CSU campus neighborhood, offering one resident's testimonial, "I can't believe how quiet it has become," since the university, neighbors, and local police department began to keep track of noisy parties, often accompanied by alcohol-related offenses, and employ existing anti-nuisance ordinances to maintain the peace.

Likewise, the system has received favorable media attention due to the alcohol policy adopted in 2001 and the attraction of Federal supplemental funds in 2002. *The Chronicle of Higher Education*, widely read by academics across the country, ran a feature in May 2001 on the CSU's examination of alcohol policies and recommendations to the Trustees for a comprehensive response, including partnerships with community interests.

Out of a sense of priority, the CSU system entered into the California Alcohol Issues Partnership by a February 13, 2002, Memorandum of Understanding with six state government agencies. The purpose of this effort is to reduce premature death, injury, social disruption, and damage to property because of alcohol consumption on or around college and university campuses.

The six state MOU agencies have helped secure Federal underage drinking and traffic safety funds to supplement available resources. One of the agencies, the California Department of Alcoholic Beverage Control, also commissioned the Higher Education Center to prepare this assessment report.

The Center analyzed reports prepared in fall 2002 by 19 CSU campuses pursuant to the biennial review requirements of the Federal Drug Free Schools and Communities Act (DFSCA) and invited campuses to complete a survey form regarding their student self-reported practices, beliefs, and attitudes. The CAIP survey also addressed campus and community prevention experiences. Eighteen CSU campuses returned the CAIP survey. In addition, the Center had access to systemwide and individual campus information in the form of archival documents and media accounts. The Center compared reported strategies – in place and planned – with recommendations contained in an expert panel report released last year by the National Institute on Alcohol Abuse and Alcoholism. The following section summarizes Center findings and recommendations. For the most part, our findings omit reference to specific campuses, although we are making tables available to select CSU and state government personnel and researchers committed to the CAIP mission.

## **Assessment Findings<sup>1</sup>**

### **1. Overall finding and implications:**

- a. The CSU system consists of radically different types of campuses. The following disparities regarding variables often associated with alcohol-related problems in national studies prompt differential responses among the 23 campuses.

- (1) On-campus undergraduate residence ranges between 0 and 59 percent (for first year students, between 0 and 95 percent),
- (2) The mean age systemwide is 24 and at one campus 32, hence the majority of CSU students are of legal drinking age.
- (3) The percentage of male students ranges between 30 and 55 percent.
- (4) Greek participation ranges from 0 to 13 percent.

- b. Where can drinking alcohol lead to problems?

- (1) Motor vehicles. Between 14 and 24 percent of students reported drinking in cars. Possession of an open container of alcoholic beverages in a motor vehicle in a public place is a violation of California law. Most CSU campuses overwhelmingly serve commuters,

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<sup>1</sup> Caveats to findings:

- a. CSU Channel Islands does not figure in this assessment as its first student enrollments were in fall 2002.

- b. Based on a range of data sources, not necessarily representative of the entire CSU undergraduate student body. For example, only seven campuses reported CORE long-form data (inclusive of drinking location).

- b. Data not independently verified.

- c. Federal law does not specify a standard format for Drug Free Schools and Communities (DFSCA) biennial review reports, and compliance with review requirements does not necessarily produce a complete and accurate account of all prevention activities underway on campus and in the community.

with 13 of the reporting campuses indicating commuters at 80 percent or higher, hence traffic safety of even more significance.

- (2) Living quarters. The most frequently identified drinking location was “where I live” (57 percent).
  - (3) Licensed premises. The next most likely venue for alcohol consumption is the category, “bars and restaurants” (48 percent). Licensed establishments, e.g., bars and restaurants, are frequently cited as a drinking venue by alcohol impaired drivers. Responsible beverage service and enforcement of underage/intoxicated patron laws are strategies for reducing risks associated with sale and service of alcoholic beverages in licensed premises. The enhanced activities envisioned by ABC for the eight demonstration communities (Chico, Fresno, Hayward, Long Beach, Monterey Bay, Sacramento, San Bernardino, and Sonoma) should provide opportunities for such technologies as ASIPS (Alcohol/drug Sensitive Information Planning System developed by Friedner Wittman and colleagues at UC Berkeley) and last-drink surveys that can further elaborate on drinking venues that disproportionately contribute to problem levels.
- c. Local partnerships. Over half of reporting campuses indicated participation in campus-community partnerships; virtually all reporting campuses identified their county alcohol and drug program administrator and California ABC district administrator.
  - d. Readiness for prevention. 17 campuses reported existence of a campus task force charged with prevention oversight, seven of which campus representatives characterized as **very active**. Eleven campuses indicated participation in some degree of campus and community partnership, although only two campuses reported these partnerships had reached a **very active** stage. Only eight of the campuses reported having a problem statement, and several of these statements were not specific to the campus, i.e., were reiterations of systemwide directives. Just nine of the campuses claimed to have a strategic planning process in place; in the aggregate, campuses were making use of only one-third of available data sources for their ongoing problem surveillance. Only one campus, in its DFSCA report, referenced use of the *College Alcohol Risk Assessment Guide*. This may be an area for further technical assistance and training. See **recommendations** below.
  - e. National affinity. The overwhelming majority of CSU campuses are members of the national association, The Network: Colleges and Universities Committed to Alcohol and Other Drug Prevention. Typically, Network member campuses have ready access to information resources from the U.S. Department of Education and its Higher Education Center for Alcohol and Other Drug Prevention.
  - f. Professional development. Almost a dozen CSU personnel participated in the U.S. Department of Education’s 16<sup>th</sup> Annual National Meeting on Alcohol and Other Drug Abuse and Violence Prevention in Higher Education in November 2002. CSU personnel gave presentations and participated in scores of educational sessions. The CSU conducts its own alcohol policy conference each spring.
  - g. Consultations. Two campuses, this academic year, have drawn on the prevention consulting services offered by EMT, a contractor supported by the California Department of Alcohol and Drug Programs.

- h. SIG grants. The California Department of Alcohol and Drug Programs will receive additional Federal prevention funds (state incentive grants, SIG for short, from the Substance Abuse and Mental Health Services Administration) for subvention to the counties and will ask that counties deploy the funds to encourage development of campus community partnerships in those locations where colleges and universities are situated.
- i. NIAAA promising practices.
  - (1) Transportation alternatives. At least two campuses support ‘safe rides’ programs. The NIAAA Call to Action cites ‘safe rides,’ i.e., alternatives to impaired driving, as a promising strategy for alcohol problem prevention in the general community.
  - (2) Parents. Four campuses specifically identified communication with parents of incoming students as one of their prevention tools. NIAAA cites parental communication as a promising strategy.
  - (3) Positive options. Six campuses included descriptions of campus-based policies to reduce high-risk use (e.g., class scheduling and increasing alcohol-free social and recreational options), another NIAAA promising strategy.
  - (4) Social norms marketing. Nine campuses have adopted social norms marketing campaigns, or plan to do so. While research is still underway regarding the efficacy of social norms marketing as a prevention tool, the experience from The Robert Wood Johnson Foundation ten campus demonstration program suggests that such activities are best coupled with other environmental prevention strategies focused on specific problem indicators.
  - (5) Alcohol promotions. At least four campuses are working with alcohol retailers to restrain price discount advertising to students.
  - (6) Responsible beverage service. Five campuses are supporting training for managers and staff at campus and community alcohol outlets. At least nine of the campuses have licensed premises on-campus for sale of alcoholic beverages to students, faculty, staff, and visitors of legal age. With the exception of sports venues (One campus has curtailed second half alcohol sales in its football stadium and another has increased controls on tailgating), the campuses do not identify these premises (pubs, cafeterias, and membership clubs) as problematic. Indeed, on-campus alcohol outlets can be models of responsible beverage service and integration of alcohol sales and services within environments offering social and recreational options, inclusive of food-service, to patrons.
  - (7) Two campuses are adopting personal drinking assessment programs that provide norms clarification and motivational enhancement (e.g., Check-Up to Go and its online variant, E-CHUG, as developed by researchers at San Diego State University) that shows promise in mediating higher risk drinking behaviors.
- j. Other elements
  - (1) Targeted populations. Reflecting national study findings, many CSU campuses have put into place prevention initiatives directed to Greeks, first year students, and residential students.

- (2) Service. One-third of CSU students reported being a volunteer on a regular basis. Leisure time options are associated with reduced levels of alcohol consumption in national studies.
- k. Exemplary practices.
- (1) San José *student fees pay for prevention* as part of Health Services (other campuses may as well, but San José said so in its DFSCA report).
  - (2) Cal Poly San Luis Obispo's president published a *good neighbor* relations encouragement in both campus and city daily newspapers.
  - (3) San Marcos and Sonoma engage in *ABC licensing hearings* to impose health and safety conditions on nearby alcohol licenses. Several other campuses, including Sacramento and San Diego, engage alcohol retailers in ongoing dialogue to promote sales and service practices (e.g., less reliance on low drinking prices as a marketing ploy to students) on a voluntary basis. Several campus – as noted above – are also encouraging adoption of responsible beverage service practices by bars and restaurants on campus and in the surrounding community.
  - (4) San Diego's *Community-Collegiate Alcohol Prevention Partnership* (C-CAPP) encompasses wide participation from representatives of other area institutions of higher education and has spawned new working relationships between campus and municipal law enforcement and the state ABC. It has also been a springboard for development of the San Diego County Presidents' Forum enlisting almost a dozen campus CEOs committed to reduction of alcohol-related harm.
  - (5) Sacramento plans to reduce the number of alcohol related items sold in the *campus bookstore*. Shot glasses and beer tankards, often super sized, bearing the seal of the university, may contribute to the myth that drinking alcohol in larger quantities is an indispensable part of the college experience.
  - (6) Sacramento modified policies at football games to control tailgating and use of *alcohol in the stadium*; reportedly resulting in a dramatic decline in alcohol related problems. Fresno, responding to disturbances at its football stadium, moved the last call for alcohol sales from the end of the third quarter to half time.

#### **The Center Recommends that:**

1. CSU adopt a problem-oriented prevention focus based on favorable health and safety outcomes, i.e., specific reductions in problem indicators. As with The Robert Wood Johnson Foundation "A Matter of Degree" ten campus prevention initiative administered through the American Medical Association, *success* appears to take the form of measurable reduction in problem indicators rather than lower incidence of student self reported higher risk drinking behavior, e.g., the consumption of five (male) or four (female) or more drinks during a single drinking occasion at least once in the past two weeks (i.e., the so-called *binge* drinking measure).



2. All CSU campuses draw on additional sources of problem ***indicator data***, develop campus specific ***problem statements***, and engage in ***strategic planning***, as many but not all are now doing.
3. Organizers of the 2003 CSU alcohol policy conference consider a skills-building session on application of the ***logic model*** approach to strategic prevention planning and data monitoring and the *College Alcohol Risk Assessment Guide*, perhaps calling upon professor Lance Segars and colleagues at San Diego State University as faculty for such a session.
4. Representatives of ABC, ADP, other state agencies, CSU's Alcohol Policy Steering Committee, and the Center meet to determine ways and means of ***marketing technical assistance*** consultation and SIG availability to respective CSU campuses and county health officials based on campus- and community-specific needs assessments and strategic plans.
5. CSU campus leadership sustain and strengthen relationships with ***county health officials*** pertaining to forthcoming SIG grants and avail themselves of ADP furnished technical assistance via EMT. (The Center, with ADP backing, has referred potential consultants for EMT consideration, to facilitate assistance to campuses in such skills area as logic model, evaluation, responsible beverage service, community coalition building, media advocacy, ASIPS, and the *College Alcohol Risk Assessment Guide*.)
6. CSU systemwide and campus leadership agree on a ***common DFSCA biennial review reporting format*** (for 2004) focusing on outcomes and based on a set of strategies associated with improved health and safety, e.g., the NIAAA college drinking panel's Call to Action. While not a Federal requirement, CSU could enhance the information-sharing value of biennial reports while embracing in the NIAAA report that some legal scholars are accepting as a new standard of practice for legal liability.

## Appendix 1: Acknowledgments

We acknowledge acting ABC director Jerry Jolly, former director Manuel Espinoza, and intergovernmental relations director Dennis Clear for inviting the Center to be of assistance in realization of the CAIP mission. Allison Jones and Laura McCrary, CSU Chancellor's Office, furnished DFSCA biennial review reports and campus contact data. Colleen Bently-Adler Shirley Uplinger, CSU-Sacramento and CSU Alcohol Policy Steering Committee, introduced Center personnel to campus vice presidents for student affairs. Kathryn Jett, Michael Cunningham, and Paul Brower, ADP, advised on SIG and EMT resource availability. Two-dozen campus and community representatives and state administrators met with Center staff during the California Prevention Summit in early November and provided insights that helped us launch this assessment.

The Center thanks the following individuals and their campus colleagues for responding to our call for CAIP survey data in late December 2002 and early January 2003.

CSU CAMPUS	CAIP SURVEY COMPLETED BY	E-MAIL ADDRESS
Chico	Shauna Quinn, Program Manager	squinn@csuchico.edu
Dominguez Hills	Randy Zarn, Associate Vice President Student Life	Rzarn@csudh.edu
Fresno	Paul Oliaro, Vice President for Student Affairs	poliaro@csufresno.edu
Hayward	Maggie Gaddis, Health Educator	mgaddis@csuhayward.edu
Long Beach	Renee Twigg, Director, University Student Health Services	rtwigg@csulb.edu
Los Angeles	Joanna Gaspar, Senior Health Educator	jgaspar@cslanet.calstatela.edu
Monterey Bay	Andy Klingelhofer, Director of Residential Life	Klingelhofer@csumb.edu
Northridge	Terry D. Piper, Vice President for Student Affairs	terry.piper@csun.edu
Pomona	Tomás Morales, Chair, Alcohol & Other Drugs Advisory Council; VP, Division of Student Affairs	tdmorales@csupomona.edu
Sacramento	Heather Dunn Carlton, Assistant Director, Student Activities/Chair, Alcohol Advisory Council	heather@csus.edu
San Bernardino	Howard S. Wang, Assistant Vice President, Student Affairs	hwang@csusb.edu
San Diego	James Lange, Coordinator of AOD Initiatives	<a href="mailto:jlange@mail.sdsu.edu">jlange@mail.sdsu.edu</a>
San Francisco	Michael Ritter, Coordinator, Counseling & Psychological Services' Prevention Education Programs	mritter@sfsu.edu
San José	Margaret Tam, PEP Coordinator	margeTam_email.sjsu.edu
San Luis Obispo	Ardith Trengenza, Director, Judicial Affairs	<a href="mailto:atrengenz@calpoly.edu">atrengenz@calpoly.edu</a>
San Marcos	Susan E. Mitchell, Senior Director, Health, Counseling, & Disability Services	smitchel@csusm.edu
Sonoma	Rand Link, Vice President for Student Affairs	rand.link@sonoma.edu
Stanislaus	Fred Edmondson, Associate Vice President for Student Affairs	fedmondson @csustan.edu

## Appendix 2: Scope of Work

The California Department of Alcoholic Beverage Control issued an Inter-Agency Agreement to UCSD on behalf of the Center. The Agreement's scope of work, following, is the basis for the Center's involvement, including submission of this report.

The purpose of this effort is to reduce premature death, injury, social disruption, and damage to property because of alcohol consumption on or around college and university campuses by promoting safe, healthy, and learning-conducive environments. University of California, San Diego (UCSD) and the Higher Education Center for Alcohol and Other Drug Prevention (Center) share the commitment of the California State University (CSU) system and the State of California, as expressed in the February 13, 2002, Memorandum of Understanding between CSU and six state agencies.

The Center will conduct an initial readiness assessment phase involve all the 23 CSU campuses – with more detail for the eight campuses designated by the System for initial emphasis. This assessment will draw from each campus' Federal Drug-free Schools and Campuses Act (DFSCA) biennial review and other existing data sources made available by the respective campuses and CSU Office of the Chancellor. Concurrently, UCSD/Center project personnel will assemble and canvass archival data – regarding the scope and nature of alcohol problems on and around CSU campuses – including documents developed during the Chancellor's 2000 – 2001 systemwide alcohol policy committee in order to create a summary memorandum in the fourth month about the extent of problems and solutions underway or contemplated.

UCSD and Center will perform the following task:

1. Conduct readiness assessment of 23 CSU campuses by end of December and furnish interim report to ABC.
2. Develop a more detailed assessment for the eight designated demonstration campuses by mid-February.

### Appendix 3: HEC CAIP Chronology

The Higher Education Center is now involved with multicampus and multipartner prevention coalitions in 46 states. As a way of documenting our participation for purposes of information-sharing and transferability of experiences, we are recording a chronology of key steps, such as the one below.

When	Who	What
<b>2002</b>		
February 13	CSU chancellor, California Cabinet secretary Maria Contreras-Sweet, and six state agencies	Execute CAIP MOU
April 12	CSU system	Convenes first alcohol policy conference
June 20 - 23	Higher Ed Center	Convenes fourth statewide initiatives leadership institute, with Cal ABC representative participation
July 10	Cal ABC	Approaches Center about CAIP involvement
August 9	UCSD on behalf of Center	Submits Inter-Agency Agreement proposal to ABC
August 22	CSU Alcohol Policy Committee	Selects eight demonstration campuses for enhanced prevention activities: Chico, Fresno, Hayward, Long Beach, Monterey Bay, Sacramento, San Bernardino, and Sonoma
August 29	Cal Governor Gray Davis	Establishes Interagency Coordinating Council for the Prevention of Alcohol and Other Drugs with both the CSU and the UC as members and Kathryn Jett as the chair
October 1	Cal ABC and UCSD (on behalf of Center)	Reach agreement on terms and conditions of Inter-Agency Agreement
November 4, 2002	Cal ABC, CSU Alcohol Policy Steering Committee (represented by Heather Dunn Carlton, CSUS), and Center	Convene a brainstorming meeting of campus representatives, researchers, and public health and safety officials in San Diego for CPS/NPN meetings. The purpose of this event is to foster relationships, strengthen common purpose, and explore further opportunities for collaboration
November 18	Dennis Clear, Cal ABC, and Center's Tom Colthurst	Meet with Shirley Uplinger and Heather Dunn Carleton, CSUS, and (by phone) Allison Jones, Chancellor's office, to coordinate schedules. Same day, scan CSUS and CSU Fresno campuses, and later meet with Paul Olario, CSU Fresno
November 22	Renee Twigg, CSULB and Network regional coordinator	Convenes California roundtable at U.S. Department of Education meeting, with bulk of agenda devoted to CAIP.

<b>When</b>	<b>Who</b>	<b>What</b>
November 26	Michael Cunningham and Paul Brower, ADP, Center's Tom Colthurst	Meet regarding SIG and EMT resource availability for CAIP
December 2	Center staff	Launches Web site at <a href="http://www.atc.ucsd.edu/hec/CAIP/index.htm">www.atc.ucsd.edu/hec/CAIP/index.htm</a> and electronic mailing list to facilitate project communication and document access
December 5	Center's Barbara Ryan	Meets with CSU Alcohol Steering Committee and with campus vice presidents for student affairs to explain Center's assessment role; Center agrees to restrict dissemination of campus-specific data; CSU concurs in limited release to state agencies and other researchers committed to CAIP mission
December 6	Center staff	Begin to receive, tabulate, and analyze DFSCA biennial review reports and CAIP surveys from CSU campuses
<b>2003</b>		
January 22	Center staff	Completes receipt of DFSCA reports and CAIP surveys to be incorporated in this first assessment report
January 22	Center staff	Reviews data tabulations and prepare findings and recommendations for this report
January 24	Center staff	Initiates phase two – focused on eight demonstration campuses – by initiating appointments with vice presidents for student affairs in late February and March
January 27	Center staff	Submits this report to Dennis Clear, Cal ABC; Allison Jones and Colleen Bentley-Adler, CSU Chancellor's Office; Shirley Uplinger, CSU Alcohol Policy Steering Committee and CSUS

## Appendix 4: CAIP Survey



### CALIFORNIA ALCOHOL ISSUES PARTNERSHIP (CAIP) Basic Higher Education Campus Information Assessment Survey (12/05/02)

Thank you for serving as CAIP contact with the Higher Education Center. We are furnishing support services for the California Department of Alcoholic Beverage Control in support of the CAIP Memorandum of Agreement between the California State University System and California State Government agencies. The information you provide on this form will assist us in advising ABC and other State agencies about resources and strategies for reducing alcohol related problems on your campus and in your broader community. More information at [www.atc.ucsd.edu/hec/CAIP/index.htm](http://www.atc.ucsd.edu/hec/CAIP/index.htm)

**Please complete and return ideally via e-mail by Friday, December 20, 2002 to Tom Colthurst at [tcolphurst@ucsd.edu](mailto:tcolphurst@ucsd.edu) or use postal address at [www.atc.ucsd.edu/hec/CAIP/index.htm](http://www.atc.ucsd.edu/hec/CAIP/index.htm)**

#### 1. Contact Information

Name of Institution:		Date completed:
Completer of this survey:	Telephone:	
Position:	Fax:	
Campus Web Address:	Email:	

#### 2. Demographics

Please provide information about your campus. Possible sources for this information may include the admissions office, registrar, or residence life.

- |                                   |                                  |                                   |
|-----------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Two-year | <input type="radio"/> Public     | <input type="checkbox"/> Rural    |
| <input type="radio"/> Four-year   | <input type="checkbox"/> Private | <input type="checkbox"/> Suburban |
|                                   |                                  | <input type="checkbox"/> Urban    |

Number of full-time undergraduate students:		Percentage of students who are Greek members:	%
Percentage of all students who live on-campus:	%	Percentage of students who live in Greek housing:	%
Percentage of first-year students who live on-campus:	%	Percentage of students who are commuter students:	%
Percentage of intercollegiate athletes:	%	Percentage of students who are male:	%

Ethnic Origin: We'll pull this information from your website after you return survey.

African American		%	Mexican American		%
American Indian		%	Other Latino		%
Asian		%	Pacific Islander		%
Filipino		%	White		%
			Total Identified		%

### 3. Structure of Your Campus Alcohol and Other Drug (AOD) Program

- a. Is there a central department or person responsible for AOD prevention activities on your campus?

☐ Yes      ☐ No

If yes, please specify this department and/or person:

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If no, please describe how prevention and education activities on campus are initiated and coordinated:

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- b. How many full and part-time campus members are assigned to AOD prevention? Please approximate the total amount of time spent on this effort by the following:

Full-time:	Part-time:
Professional staff:	Professional staff:
Graduate assistant:	Faculty:
Faculty:	Graduate students:
	Undergraduate students:

- c. Does your AOD prevention program focus primarily on alcohol, other drugs, or both? (Check one)

☐ Alcohol      ☐ Drugs      ☐ Both

- d. How often do key AOD prevention and education personnel meet with your university's top administrators to discuss prevention?

☐ Ongoing    ☐ Every year    ☐ Every two years    ☐ Every three years or more    ☐ Never

- e. How often are your alcohol and other drug policies formally reviewed for possible revision?

☐ Ongoing    ☐ Every year    ☐ Every two years    ☐ Every three years or more    ☐ Never

- f. Who reviews your AOD policies?

Name:

Title:

#### 4. Coalitions

a. Does your institution currently have a campus-based task force to address AOD prevention?

☐ Yes ☐ No *If no, go to question 4a(2) below*

(1). If yes, how would you describe the campus-based task force's recent activity level?

☐ Very Active ☐ Active ☐ Inactive

(2). If no, is there a plan in place to develop a campus-based task force?

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b. Does your institution participate in a campus-community coalition to address AOD prevention?

☐ Yes ☐ No *If no, go to question (2)*

(1) If yes, how would you describe the coalition's recent activity level?

☐ Very Active ☐ Active ☐ Inactive

(2) If no, is there a plan in place to develop a campus-community coalition?

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***If you have both a "task force" and a "campus-community coalition," please answer the following questions with the campus-community coalition in mind. If you only have a task force, the following questions relate to the task force.***

c. How important do you think it is to have a campus-community coalition to address AOD problems?

☐ Very Important ☐ Somewhat Important ☐ Not Important

Comments:

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d. Please describe the extent to which your coalition (or task force) does the following:

	Great Extent	Moderate Extent	Little Extent	No Extent	Don't know
Members collaborate on various projects/tasks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coalition relies on current data and research to plan prevention activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Members are involved in setting the agenda for the group	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Membership adequately represents major stakeholders interested in AOD prevention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are established channels for communication between members (i.e. E-mail, phone lists, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coalition meetings are scheduled regularly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meeting notes are distributed to members in a timely way	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Members are working towards a common goal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tasks are fairly distributed among members of the coalition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- e. Does your coalition (or task force) have an identified problem statement? ☐ Yes ☐ No

If yes, what is it?

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- f. Is there agreement among coalition (task force) members about this problem statement?
- ☐ Full agreement ☐ Some agreement ☐ Little agreement ☐ No agreement

- g. Has your coalition (task force) undertaken a strategic planning process related to the identified problem statement?

☐ Yes ☐ No

- h. Has your coalition (task force) collected data that support this identified problem?

☐ Yes ☐ No

If yes, which of the following data were used?

- ☐ Field Observations  
☐ Environmental Scan  
☐ Police arrest records ☐ Local Police ☐ Campus Police ☐ Both  
☐ ER data  
☐ Vandalism data  
☐ Student Health Records  
☐ Dormitory RA records  
☐ Core Survey  
☐ ACHA Survey  
☐ Other survey

- o Focus Groups
- o Informal Interviews
- o Campus policy and policy violation records
- o Other \_\_\_\_\_

i. Who is your County Alcohol and Drug Program Administrator? \_\_\_\_\_

j. Who is your California ABC District Administrator? \_\_\_\_\_

k. Is your campus a member of the Network of Colleges and Universities ☐ Yes; ☐ No  
(Network directory: <http://www2.edc.org/hec/network/full-listing-by-state.asp?state=CA>)

## 5. Strategies

a. Please indicate which strategies your coalition has chosen to address:

For each strategy, describe to what extent, if any, you have experienced progress in each of the outcomes:

Yes	No	Strategies	Much Progress	Some Progress	Little Progress	No Progress
<input type="radio"/>	<input type="radio"/>	<b>A. Promoting social, recreational, extracurricular, and public service alternatives to AOD use (if no, skip to B)</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		What outcomes have you identified for this strategy? (For each, probe how much progress)				
<input type="radio"/>	<input type="radio"/>	<b>B. Creating a health-promoting social, academic, and residential environment (if no, skip to C)</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		What outcomes have you identified for this strategy? (For each, probe how much progress)				
Yes	No	Strategies	Much Progress	Some Progress	Little Progress	No Progress
<input type="radio"/>	<input type="radio"/>	<b>C. Limiting alcohol availability (if no, skip to D)</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		What outcomes have you identified for this strategy? (For each, probe how much progress)				
<input type="radio"/>	<input type="radio"/>	<b>D. Enforcing campus policy and state and local laws (if no, skip to E)</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		What outcomes have you identified for this strategy? (For each, probe how much progress)				
<input type="radio"/>	<input type="radio"/>	<b>E. Restricting marketing and promotion of alcoholic beverages (if</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

no, probe for other strategies)

What outcomes have you identified for this strategy? (For each, probe how much progress)

10. Overall, how would you describe the effectiveness of your coalition in addressing AOD prevention?

- ☐ Very Effective      ☐ Somewhat Effective      ☐ Somewhat ineffective      ☐ Very ineffective

### Knowledge/Attitudes Regarding environmental approach

11. Thinking about university and college AOD prevention, in general, how effective do you think each of the following strategies are in reducing AOD problems among college students?

	Very Effective	Somewhat Effective	Somewhat Ineffective	Very Ineffective	Don't Know
Change norms related to excessive drinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Create AOD-free options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increase/enforce laws related to alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduce the availability of alcohol ( <i>both on and off campus</i> )	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reduce/restrict the promotion of alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### 6. Evaluation:

a. How important do you think evaluation/monitoring is to your AOD prevention efforts?

- ☐ Very Important      ☐ Somewhat Important      ☐ Not Important

b. Do you have an evaluation plan? If yes, which evaluation tools do you plan to use?

- ☐ Student survey  
☐ Faculty/staff surveys  
☐ Administrator survey  
☐ Key Stakeholder interviews  
☐ Field observation  
☐ Environmental Scan  
☐ Focus Groups  
☐ Intercept interviews  
☐ School Records  
☐ Other \_\_\_\_\_

c. How important is it to assess your campus-community readiness for change?

- ☐ Very Important      ☐ Somewhat Important      ☐ Not Important

### Survey Results

- ☐ If you have survey data (e.g., Core survey), please check here and complete this section below:
- ☐ If your institution does not obtain survey data, please check here and go to last page, item 15 Critical Incidents.

### Survey Administration

1. Did you conduct a survey? No ☐ Yes ☐  
Please describe:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. When was the most recent survey administered? (month/year) \_\_\_\_/\_\_\_\_
3. What was your sample size? \_\_\_\_\_
4. How was your sample selected? (random sample, classroom sample, convenience sample)  
\_\_\_\_\_
5. How were the surveys administered? (US. mail, campus mail, classroom, orientation, other)  
\_\_\_\_\_
6. What was your response rate? \_\_\_\_\_%
7. What percentage of surveyed students said your campus has AOD policies? \_\_\_\_\_%
8. What percentage of surveyed students said those policies are enforced? \_\_\_\_\_%
9. What percentage of surveyed students said they are actively involved in efforts to prevent alcohol and other drug use problems on campus? \_\_\_\_\_%
10. What percentage of surveyed students said they had had five or more drinks at a sitting over the last two weeks? \_\_\_\_\_%
11. Reported frequency of use: Please fill in the percentage of students who fall in each category.

	<u>Student's own use</u>	<u>Respondent's report of average student use</u>
Did not use	_____%	_____%
Once per year	_____%	_____%
6 times per year	_____%	_____%
Once per month	_____%	_____%
Twice per month	_____%	_____%
Once per week	_____%	_____%
3 times per week	_____%	_____%
5 times per week	_____%	_____%
Every day	_____%	_____%
12. What percentage of students reported having used alcohol at each of the following locations?

Never used	_____%	Where you live	_____%
On campus events	_____%	In a car	_____%

Residence hall \_\_\_\_\_ %

Private parties \_\_\_\_\_%

Frat/sorority \_\_\_\_\_ %

Other (please specify):

Bar/restaurant \_\_\_\_\_%

13. What percentage of surveyed students said they don't volunteer any time on or off campus? \_\_\_\_\_%

- 14 What percentage of surveyed students said they live in a designated alcohol-free/ drug-free residence? \_\_\_\_\_%

15. Critical incidents. Please indicate any critical incidents or issues that have impacted AOD prevention efforts on your campus or in the local community (e.g., senior administrator transitions, campus tragedy, and fiscal constraints, etc.).

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16. Any thing else you want us to know?

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☐ Check here if attaching reports, additional pages, or other addenda.

-End-

Thank you! We will respect the privilege of this and other information we gather for the California Alcohol Issues Partnership. We will share it with University and California state government personnel responsible for CAIP, with Center colleagues involved in CAIP support, and with scientists at the Prevention Research Center in Berkeley engaged in a research study supported by the National Institute on Alcohol Abuse and Alcoholism for purposes compatible with CAIP. We do not intend to publish or release to the media any public comparisons of CSU campuses. We will continue to keep Dennis Clear, California ABC; Allison Jones, CSU Chancellor's Office; and Shirley Uplinger, CSU-Sacramento and CSU Alcohol Policy Steering Committee chair; fully updated on our activities and will seek their review and approval for any report of our assessment findings.